BIP Social Validity Survey for Teachers

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_

For each statement, circle one number that best describes how you feel about the Behavior Intervention Plan for this student.

1. I understood all of the elements of the Behavior Intervention Plan.

 Strongly Disagree Strongly Agree

 1 2 3 4 5 6

1. Problem behaviors have decreased since the implementation of the Behavior Intervention Plan.

 Strongly Disagree Strongly Agree

 1 2 3 4 5 6

1. Appropriate classroom behaviors have increased as a result of the implementation of the behavior intervention plan.

 Strongly Disagree Strongly Agree

 1 2 3 4 5 6

1. My participation in the implementation of the Behavior Intervention Plan was relatively easy (e.g. amount of time/effort) to implement.

 Strongly Disagree Strongly Agree

 1 2 3 4 5 6

1. Participation in implementing the Behavior Intervention Plan for this student was worth the time and effort.

 Strongly Disagree Strongly Agree

 1 2 3 4 5 6

Adapted from Crone, Hawken & Horner (2010)